STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS DEPARTMENT OF LABOR AND TRAINING DIVISION OF PROFESSIONAL REGULATION

ELECTRICIANS APPLICATION

*** INSTRUCTIONS – PLEASE READ CAREFULLY ***

APPLICATIONS WILL NOT BE REVIEWED BY THE DEPARTMENT OF LABOR AND TRAINING IF THE FOLLOWING DIRECTIONS ARE NOT ADHERED TO

1)	TWO (2) HEAD AND SHOULDERS PHOTOGRAPHS (PASSPORT TYPE), MUST BE SUBMITTED WITH APPLICATION.
2)	YOUR APPLICATION MUST BE SIGNED AND NOTARIZED.
3)	APPLICATION FEE OF \$36.00 IS REQUIRED TO PROCESS YOUR APPLICATION. THIS IS A NON-REFUNDABLE APPLICATION FEE. CHECK SHOULD BE MADE PAYABLE TO THE GENERAL TREASURY/STATE OF RHODE ISLAND.
4)	UNDER WORK EXPERIENCE – A SEPARATE, DETAILED, NOTARIZED STATEMENT, ON COMPANY LETTERHEAD, OF ALL WORK RELATED EXPERIENCE, AND OTHER INFORMATION SHOULD BE ATTACHED TO THIS APPLICATION. *** PLEASE DETAIL YOUR WORK EXPERIENCE THOROUGHLY ***
5)	All Electrical Contractor/Masters Tests require verification of experience in their respective trade for at least six (6) years and must possess a journeypersons' license. Electrical Journeypersons License must be valid for at least two (2) years prior to applying for a contractor's examination.
6)	All Electrical Journeypersons Tests require verification of at least four (4) years experience in their respective trade.

A) CURRENT NATIONAL ELECTRICAL CODE BOOK – LATEST STATE APPROVED EDITION. (AVAILABLE: 1 CAPITOL HILL, PROVIDENCE, RI – 222-3032)

Reference for our tests are from the following, but not limited to:

RI Fire Code is available from Lexis Publishing http://www.lexis.com/ or

B) GENERAL TRADE KNOWLEDGE.

1-(800)-542-0957

7)

8)

STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS DEPARTMENT OF LABOR AND TRAINING DIVISION OF PROFESSIONAL REGULATION 1511 PONTIAC AVENUE – BUILDING 70 P.O. BOX 20247

CRANSTON, RHODE ISLAND 02920-0943 (401)462-8580 FAX (401)462-8528 TDD (401)462-8006 www.dlt.state.ri.us

ELECTRICIANS

*** APPLICATION FOR EXAMINATION AND APPRENTICE CARD ***

APPLICATION MUST BE CLEARLY PRINTED

SOCIAL SECURITY NUMBER	
LAST NAME FIRST NAM	E MI
STREET ADDRESS	
	-
CITY/TOWN STATE ZI	P
TELEPHONE	
DATE OF BIRTH	
EMPLOYER	
SELF-EMPLOYED/COMPANY NAME	
STREET ADDRESS	
	-
CITY/TOWN STATE Z	IP
EMPLOYER TELEPHONE	
E-MAIL ADDRESS	

FOR OFFICE USE ONLY – PLEASE DO NOT WRITE BELOW

TEST FEE PAID, CHECK, CASH, M.O.		DIVISION/COMMISSION APPROVAL FOR TEST		
\$		COMMENTS		
DATE PAID				
Applicant must answer all questions of PUBLIC, penalties for false information Addendum.				
Statement may be investigated and ve	erified for truthfulness.			
<u>GENERA</u>	L LISTING OF WORK HI	STORY		
NAME OF EMPLOYER	FROM/TO	TYPE OF WORK		
	EDUCATION			
List all education and schooling that y heating, pipefitting, sheet metal, and l		refrigeration, air conditioning,		
LOCATION	FROM/TO	DEGREE/DIPLOMA		
<u>YOU MUST LIST ANY VALI</u> AND A COPY OF YOUR OU		OLD WITH THIS DIVISION		
MIND M COLT OF TOOK OC	TOT STATE LICENSES.			
TYPE OF LICENSE	TYPE OF LICENSE	TYPE OF LICENSE		
Listed employer or customer may be application and these will have to be staken on this licensing test application	sent back to this division, properly			
APPLICANT'S SIGNATURE		NOTARY SEAL		

If you fail to pass your examination, you may request a review of the same, **in writing**, to the Division of Professional Regulation, within thirty (30) days of failure notice.

NON-REFUNDABLE PROCESSING APPLICATION FEE

ELECTRICIANS		MPUTER CODE	TEST FEE	RENEWAL & LICENSE FEE
Master Electrician	A	21	\$ 36	\$ 120
Corporation	AC	32	NO TEST	\$ 100
Journeyman Electrician	В	22	\$ 36	\$ 36
Limited Electrician/ Manufacturers	C	23	NO TEST	\$ 120
Limited Electrician/ Non-Manufacturers	D	24	NO TEST	\$ 120
Master Oil Burner Electrician	E	25	\$ 36	\$ 120
Corporation	EC	33	NO TEST	\$ 100
Journeyman Oil Burner Electrician	F	26	\$ 36	\$ 36
Master Alarm Electrician	AF (FIRE)	30	\$ 36	\$ 120
Corporation	AFC	34	NO TEST	\$ 100
Journeyman Alarm Electrician	BF (FIRE)	31	\$ 36	\$ 36
Electric Sign Contractor	SCF	28	\$ 36	\$ 120
Electric Sign Installer	CF	29	\$ 36	\$ 36
Corporation	SCFC	35	NO TEST	\$ 100
Apprentice		27	NO TEST	\$ 20